



FINANCE

PET LICENSE

Name of Owner (please print):			
Address:			
City:	Province:	PC:	
Work:	Home:	Cell:	
Application Date:	Tag:	Year:	
Pet's Name:	<input type="checkbox"/> Dog	<input type="checkbox"/> Cat	
Birth Date:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Color:	Tattoo:		
<input type="checkbox"/> Spayed/Neutered (\$25.00)	<input type="checkbox"/> Not Spayed/Neutered (\$50.00)		
<input type="checkbox"/> Chihuahua	<input type="checkbox"/> Collie	<input type="checkbox"/> Labrador	<input type="checkbox"/> Poodle
<input type="checkbox"/> Pug	<input type="checkbox"/> Retriever	<input type="checkbox"/> Rottweiler	<input type="checkbox"/> Sheppard
<input type="checkbox"/> Spaniel	<input type="checkbox"/> Shih Tzu	<input type="checkbox"/> Terrier	<input type="checkbox"/> Other
If Other, describe breed:			
FOR OFFICE USE ONLY			
Receipt Number:		Method of Payment:	
Tax Roll Number:		Customer Number:	

The personal information on this form is collected under the authority of Section 33(c) of the *Freedom of Information and Protection of Privacy (FOIP) Act* and is protected by the FOIP Act. If you have any questions or concerns about the collection and use of this information, please contact the FOIP Coordinator of the Town of Sylvan Lake at (403) 887-2141.